U S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0158 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1 File Number 11 : /27 /:-7	2.5111/ 2.5
1. File Number U - 1/37617	2. Fiscal Year Covered From:
	1 2004 Through: [12 31 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Gary Jones	Name Gunite Workers Local Union #345
-	Labor Organization File Number $042-746$
P.O. Box, Bldg., Room No., if any P.O. Box 3345	P.O. Box, Building and Room Number, if any P.O. Box 3345
Street	Street
City Burbank	City Burbank
State Ca. ZIP Code + 4 9	1508 State Ca. ZIP Code + 4 91508
5 Position in labor organization. Business Manag	ger/Secretary-Treasurer
(except as specified an interest in engaged in transactions (including to	ou or your spouse or minor child directly or indirectly had any of the following interests field in the exclusions set forth in the instructions): Deans) with, or derived income or other economic benefit of
(except as specified an interest in engaged in transactions (including to	fied in the exclusions set forth in the instructions): pans) with, or derived income or other economic benefit of
(except as specifiance) A. Held an interest in, engaged in transactions (including lomonetary value from an employer whose employees you	fied in the exclusions set forth in the instructions):
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(except as specification (including to monetary value from an employer whose employees you follow and address of Employer (including trade name, if any). Name None Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZiP Code + 4	Real in the exclusions set forth in the instructions): All cans) with, or derived income or other economic benefit of our organization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. None None Signature Index penalty of Perjury and other applicable penalties of the law, that all of the information any accompanying documents), has been examined by the signatory and is, to the best of the
(except as specification. The undersigned declares, under the specification. The undersigned declares, under the specification. The undersigned declares, under the specification contained in the specification contained in the specific and the s	Real in the exclusions set forth in the instructions): All cans) with, or derived income or other economic benefit of our organization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. None None Signature Index penalty of Perjury and other applicable penalties of the law, that all of the information any accompanying documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Gary Jones		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activity (2) any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the busines vely seeking to represent, or lirectly to, or otherwise	5	
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name: McMorgan & Co.	[Y'-]		
Trade Name, if any:	a. Labor Organiza	ation	
P.O. Box, Bldg., Room No., if any	1		
Street 3500 W. Olive Ave. Suite 690	c. Employer		}
City Burbank			
State Ca. ZIP Code + 4 91505			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	ing,	
Name	Investment mar	agers for the Ur	ion
Trade Name, if any:			· } :
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar val	ue of such dealing.	1500.00
City .	12.a. Nature of interest he		±3303.0.0
State ZIP Code + 4	Dinner mee spouse	70.00 70.00	
	January 20	004	
	12.b. Amount.	L	140.00
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	er parts A and B above) y or other thing of value.	<u> </u>	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		. .
Name none	none		;
Trade Name, if any:			:
P.O. Box, Bldg., Room No., if any	1		t
Street			:
City			:
State ZIP Code + 4	1		
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.	<u> </u>	0

Name of Person Filing Gary Jones	File Number U-
B. Held an interest in or derived income or economic benefit with monetary valisubstantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to or otherwise
8. Name and address of Business (including trade name, if any). Name McMorgan & Co. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street: 3500 W. Olive Ave. Suite 690	9. Business deals with: X a. Labor Organization b. Trust c. Employer
City Burbank	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name: Trade Name, if any: P.O. Box, Bidg., Room No., if any	11.a. Nature of such dealing. investment managers for the Union
Street	11.b. Approximate dollar value of such dealing. 15.00.00.
State ZIP Code + 4	dinner meeting 77.00 spouse 77.00
	12.b. Amount. 154:00
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name none Trade Name, if any:	none
P.O. Box, Bldg., Room No., if any Street	
City State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.

Gary Jones		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary valuables substantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise	3	
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name McMorgan & Co.	(· · · · · · · · · · · · · · · · · · ·		
Trade Name, if any:	X: a. Labor Organizal	tion	
P.O. Box, Bldg., Room No., if any)		
Street 3500 W. Olive Ave. Suite 690	c. Employer		
City Burbank			
State Ca. ZIP Code + 4 91508			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ing.	
Name :	investment m	nanagers fot th	e Union
Trade Name, if any:			:
P.O. Box, Bldg., Room No., if any			· ·
Street	11.b. Approximate dollar valu	ue of such dealing.	1500.00
City -	12.a. Nature of interest hel		
State ZIP Code + 4	Lunch meet	iing	60.00
	December 2	_	
	200	-00.	
	12.b. Amount.		60.00
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	1 mm 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	
Name none		ione	;
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any			
Street			;
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State ZIP Code + 4			VAC-101-2-101 MARKET 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.		0

Name of Person Filing Gary Jones		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary v substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or Is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business tively seeking to represent, or ndirectly to, or otherwise	3	
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Turner Dale Associates			
Trade Name, if any:		uon	
P.O. Box, Bldg., Room No., if any			
Street 1214 Donnelly Ave.]		
City Burlingame			
State Ca. , ZIP Code + 4 94010			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ing.	
Name Construction Laborers Pension Trust	Real estate in	vestment man	agers for the
Trade Name, if any:	Trust Fund		:
P.O. Box, Bidg., Room No., if any]		:
Street 4399 Santa Anita Ave. Suite 200	11.b. Approximate dollar val	ue of such dealing.	2.227,430.00
City El Monte	12.a. Nature of interest he	ld or income receive	
State Ca. ZIP Code + 4 91731	dinner me spouse	eting	70.00 70.00
	12-3-2004		
	12.b. Amount.		140.00
C. Received from any employer (other than an employer covered un or from any labor relations consultant to an employer any payment of mon	nder parts A and B above) ey or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name none	none		:
Trade Name, if any:]		:
P.O. Box, Bldg., Room No., if any			:
Street]:		:
City			:
State ZIP Code + 4			
12 h le the Rusiness an Employer or Consultant 7	14.b. Amount of payment.		0

Name of Person Filing Gary Jones		File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Turner Dale Associates	רייי יין. יייי יין				
Trade Name, if any:	a. Labor Organizat X b. Trust	ion			
P.O. Box, Bldg., Room No., if any	c. Employer				
Street 1214 Donnelly Ave.	c. Employer				
City Burlingame					
State Ca. , ZIP Code + 4 94010					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing	ng.			
Name Construction Laborers Pension Trust	Real estate in	nvestment manag	gers for the		
Trade Name, if any:			j		
P.O. Box, Bidg., Room No., if any			:		
Street 4399 Santa Anita Ave. Suite 200	11.b. Approximate dollar valu	ue of such dealing.	2,227,430.00		
City El Monte	12.a. Nature of interest hel	d or income received.			
State Ca. ZIP Code + 4 91731	Dinner meet spouse	ing	90.00 90.00		
	12-2-2004		The state of the s		
	12.b. Amount.		180.00		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name none	none		: .		
Trade Name, if any:			·		
P.O. Box, Bldg., Room No., if any			:		
Street			:		
City			1		
State ZIP Code + 4	:	o castam remains a parent sendicion to ma			
13.b. is the Business an Employer or Consultant 7	14.b. Amount of payment.		0		

Name of Person Filing (Gary Jones		File Number U-	
B. Held an interest in or derived income o substantial part of which consists of buyin of an employer whose employees your fal (2) any part of which consists of buying fredealing with your labor organization or with the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of buying from the substantial part of which consists of the substantial part of	g from, selling or leasing to, or othen for organization represents or is activ om or selling or leasing directly or ind	wise dealing with the business yely seeking to represent, or lirectly to, or otherwise	;	
8. Name and address of Business (includin	g trade name, if any).	9. Business deals with:		
Name Associated Third Par		1 ,i		
		a. Labor Organizat	tion	
P.O. Box, Bldg., Room No., if any		X b. Trust		
Street 4399 Santa Anita A	ve. Suite 200	c. Employer		
City El Monte				
State Ca.	ZIP Code + 4 91731			
10. If 9.b. or 9.c. is checked give trust or o	employer's name.	11.a. Nature of such deali	ing.	
Name Construction Labore		Administrators	for the Trust	Fund
Trade Name, if any:				:
P.O. Box, Bldg., Room No., if any				:
Street 4399 Santa Anita As	ve. Suite 200	11.b. Approximate dollar value	ue of such dealing.	359,383.00
City El Monte	}	12.a. Nature of interest hel	ld or income received.	
State Ca.	ZIP Code + 4 91731	dinner mee spouse	ting	89.00 89.00
		5-16-2004	4	
		12.b. Amount.		178.00
C. Received from any employer (oil or from any labor relations consultant to	ner than an employer covered und an employer any payment of mone;	er parts A and B above) y or other thing of value.		
13.a. Name and address of Employer or t (including trade name, if any).	abor Relations Consultant	14.a. Nature of payment.		
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Trade Name, if any:				
P.O. Box, Bidg., Room No., if any	and the second s			,
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Name of Person Filing Gary Jones		File Number U-	
8. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the busines rely seeking to represent, or irectly to, or otherwise	s	
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Associated Third Party Administrators	1		}
Trade Name, if any:	a. Labor Organiza	ation	
P.O. Box, Bidg., Room No., if any	(X) b. Trust		
Street 4399 Santa Anita Ave. Suite 200	C. Employer		Í
City El Monte			
State Ca. ZIP Code + 4 91731			ļ
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dea	ling.	
Name Construction Laborers Vacation Trust	Administr	ators for the	Trust Fund
Trade Name, if any:			:
P.O. Box, Bldg., Reom No., if any			•
Street 4399 Santa Anita Ave. Suite 200	11.b. Approximate dollar va	lue of such dealing.	359,383.00
City El Monte	12.a. Nature of interest he		
State Ca. ZIP Code + 4 91731	lunch π	neeting	27.00
			:
	8-17-2004	!	
	12.b. Amount.		27.00
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name none	non	ne	÷
			:
Trade Name, if any:			:
P.O. Box, Bldg., Room No., if any			:
Street			:
City State ZIP Code + 4			1
Othe	14.b. Amount of payment		
13.b. Is the Business an Employer or Consultant ?			0

Gary Jones		File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any),	9. Business deals with:				
Name Associated Third Party Administrators	(···)				
Trade Name, if any:	a. Labor Organiza	tion			
P.O. Box, Bldg., Room No., if any	c. Employer				
Street 4399 Santa Anita Ave. Suite 200	tim. or improjer				
City E1 Monte					
State Ca. , ZIP Code + 4 91731			}		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	irıg.			
Name Construction Laborers Vacation Trust	Administrator	s for the Trus	t Fund		
Trade Name, if any:			!		
P.O. Box, Bldg., Room No., if any					
Street 4399 Santa Anita Ave. Suite 200	11.b. Approximate dollar val	ue of such dealing.	359,383.00		
City El Monte	12.a. Nature of interest he	ld or income received.			
State Ca. ZIP Code + 4 91731	Dinner mee spouse	eting	61.00 61.00		
	11-30-2004				
	12.b. Amount.		122.00		
C. Received from any employer (other than an employer covered unde	r parts A and B above)				
or from any labor relations consultant to an employer any payment of money	or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	THE STATE OF THE S			
Name none	none		:		
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any	: :		:		
Street	i				
City			; ;		
State ZIP Code + 4	:	W-75 Barren / 45 /Ba & Dec 4/1/14 4/1/4/2 / 1887 - 411			
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.		0		

Name of Person Filing Gary Jones	File Number U-
B. Held an interest in or derived income or economic benefit with monetary valuable substantial part of which consists of buying from, selling or leasing to, or otherwood an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	ely seeking to represent, or rectly to, or otherwise
8. Name and address of Business (including trade name, if any),	9. Business deals with:
Name Construction Laborers Vacation Trust Trade Name if any:	X a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust c. Employer
Street 4399 Santa Anita Ave. Suite 200	C. Zitipioyei
City El Monte	
State Ca. ZIP Code + 4 91731	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name :	Provides vacation benefits to the Unions members collected pursuant to collective
Trade Name, if any:	bargaining agreements
P.O. Box, Bidg., Reom No., if any	
Street	11.b. Approximate dollar value of such dealing. 792,695.00
City .	12.a. Nature of interest held or income received.
State ZIP Code + 4	reimbursed trustee educational seminar conference expenses
	11-30-2004/12-4-2004
	12.b. Amount. 1974.00
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name none	none
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State : ZIP Code + 4 !	
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.

Name of Person Filing Gary Jones	File Number U-	
8. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing tc, or other of an employer whose employees your labor organization represents or is actifully any part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or firectly to, or otherwise	
8. Name and address of Business (including trade name, if any). Name Construction Laborers Vacation Trust Trade Name, if any:	9. Business deals with: X a. Labor Organization b. Trust	
P O. Box, Bldg., Room No., if any Street 4399 Santa Anita Ave. Suite 200 City El Monte State Ca. ZIP Code +4 91731	c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name : Trade Name, if any: P.O. Box, Bldg., Reom No., if any	provides vacation benefits to to members collected pursuant to design bargaining agreements	
Street	11.b. Approximate dollar value of such dealing. 792,	.695.00
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	reimbursed trustt educational sen conference expenses 5-15-2004/5-20-2004	ninar
	12.b. Amount. 23	384.00
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of mone	der parts A and B above)	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name none	none	:
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		ŀ
Street		;
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.	0

U.S. Department of Labor Employee Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW Washington, D.C. 20210



Re: Form LM-30 filing for Gary Jones Local #345, Labor Org. file #042-746

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advise, including guidance regarding benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004

Sincerely

Gary Jones